BROWN COUNTY HEALTH CARE CENTER

2900 ST. ANTHONY DRIVE

GREEN BAY	54311	Phone: (920) 391-4700		Ownership:	County
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/03):	93	Title 18 (Medicare) Certified?	No
Total Licensed	Bed Capacity	(12/31/03):	93	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on 12/31	./03:	86	Average Daily Census:	90

Services Provided to Non-Residents		Length of Stay (12/31/03)					
Home Health Care Supp. Home Care-Personal Care		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	12.8 27.9
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65   65 - 74		More Than 4 Years	54.7
Day Services Respite Care	No No	Mental Illness (Other)	40.7	75 - 84	26.7	I	95.3
Adult Day Care Adult Day Health Care	No No	•		85 - 94   95 & Over		******* Full-Time Equivalent	*****
Congregate Meals	No	Cancer	0.0	İ		Nursing Staff per 100 Resi	dents
Home Delivered Meals Other Meals	No No	Fractures   Cardiovascular		   65 & Over		(12/31/03) 	
Transportation	No	Cerebrovascular					9.3
Referral Service Other Services	No No	Diabetes   Respiratory		Gender 		,	11.0
Provide Day Programming for		Other Medical Conditions	9.3	Male	45.3	Aides, & Orderlies	53.2
Mentally Ill Provide Day Programming for	Yes	 		Female 	54.7 	•	
Developmentally Disabled	No	•	de de de de de de de de		100.0	•	and a development of the de-

## Method of Reimbursement

		edicare itle 18			Medicaid 'itle 19			Other			Private Pay			amily Care			anaged Care	l		
Level of Care	No.	90	Per Diem (\$)	No.	ૃ	Per Diem (\$)	No.	용	Per Diem (\$)	No.	엉	Per Diem (\$)	No.	응	Per Diem (\$)	No.	୍ଚ	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	78	95.1	129	0	0.0	0	4	100.0	187	0	0.0	0	0	0.0	0	82	95.3
Intermediate				4	4.9	108	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	4.7
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		82	100.0		0	0.0		4	100.0		0	0.0		0	0.0		86	100.0

County: Brown
BROWN COUNTY HEALTH CARE CENTER

Facility ID: 1710
Page 2

Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03										
Deaths During Reporting Period				% Needing		Total						
Percent Admissions from:	i	Activities of	િ		sistance of	% Totally	Number of					
Private Home/No Home Health	9.5	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.0	Bathing	0.0		65.1	34.9	86					
Other Nursing Homes	38.1	Dressing	9.3		69.8	20.9	86					
Acute Care Hospitals	9.5	Transferring	50.0		34.9	15.1	86					
Psych. HospMR/DD Facilities	42.9	Toilet Use	23.3		50.0	26.7	86					
Rehabilitation Hospitals	0.0	Eating	36.0		54.7	9.3	86					
Other Locations	0.0	******	*****	*****	*****	******	*****					
Total Number of Admissions	21	Continence		용	Special Treatme	nts	용					
Percent Discharges To:	1	Indwelling Or Extern	al Catheter	2.3	Receiving Res	piratory Care	0.0					
Private Home/No Home Health	0.0	Occ/Freq. Incontinen	t of Bladder	55.8	Receiving Tra	cheostomy Care	0.0					
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	t of Bowel	40.7	Receiving Suc	tioning -	0.0					
Other Nursing Homes	0.0				Receiving Ost	omy Care	0.0					
Acute Care Hospitals	0.0	Mobility			Receiving Tub	e Feeding	0.0					
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	10.5	Receiving Mec	hanically Altered Diets	59.3					
Rehabilitation Hospitals	0.0											
Other Locations	26.1	Skin Care			Other Resident	Characteristics						
Deaths	73.9	With Pressure Sores		3.5	Have Advance	Directives	55.8					
Total Number of Discharges	1	With Rashes		1.2	Medications							
(Including Deaths)	23				Receiving Psy	choactive Drugs	66.3					

	This	Other	Hospital-	Ž	All
	Facility Based Facili		acilities	Fac	ilties
	%	8	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.5	90.1	1.05	87.4	1.08
Current Residents from In-County	83.7	83.8	1.00	76.7	1.09
Admissions from In-County, Still Residing	71.4	14.2	5.05	19.6	3.64
Admissions/Average Daily Census	23.3	229.5	0.10	141.3	0.17
Discharges/Average Daily Census	25.6	229.2	0.11	142.5	0.18
Discharges To Private Residence/Average Daily Census	0.0	124.8	0.00	61.6	0.00
Residents Receiving Skilled Care	95.3	92.5	1.03	88.1	1.08
Residents Aged 65 and Older	73.3	91.8	0.80	87.8	0.83
Title 19 (Medicaid) Funded Residents	95.3	64.4	1.48	65.9	1.45
Private Pay Funded Residents	4.7	22.4	0.21	21.0	0.22
Developmentally Disabled Residents	2.3	1.2	1.96	6.5	0.36
Mentally Ill Residents	81.4	32.9	2.48	33.6	2.42
General Medical Service Residents	9.3	22.9	0.41	20.6	0.45
Impaired ADL (Mean)*	49.1	48.6	1.01	49.4	0.99
Psychological Problems	66.3	55.4	1.20	57.4	1.16
Nursing Care Required (Mean) *	8.0	7.0	1.14	7.3	1.09